COMMITTEE REPORT

MR. PRESIDENT:

The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 509, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

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             Page 1, line 1, delete "IC 2-2.1-4" and insert "IC 27-1-3-30".
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             Page 1, line 2, delete "CHAPTER" and insert "SECTION".
 3
             Page 1, line 3, delete "2003]:" and insert "2004]:".
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             Page 1, delete line 4.
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             Page 1, line 5, delete "Sec. 1." and insert "Sec. 30. (a)".
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             Page 1, run in lines 3 through 5.
 7
             Page 1, line 5, delete "chapter," and insert "section,".
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             Page 1, delete lines 7 through 17.
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             Page 2, delete lines 1 through 2.
             Page 2, line 3, delete "Sec. 4." and insert "(b)".
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             Page 2, line 3, delete "chapter," and insert "section,".
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12
             Page 2, line 5, delete "Sec. 5. The" and insert "(c) As used in this
13
          section,".
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             Page 2, line 5, delete "mandated" and insert ""mandated benefit"
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          means certain".
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             Page 2, line 5, delete "evaluation commission is" and insert "or an
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          offering of certain health coverage that is required under:
               (1) an accident and sickness insurance policy; or
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               (2) a contract with a health maintenance organization.".
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             Page 2, delete lines 6 through 42, begin a new paragraph and insert:
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1	"(d) An insurer that issues an accident and sickness insurance		
2	policy and a health maintenance organization, not later than		
3	March 1 of each year, shall provide to the department in a format		
4	and medium prescribed by the department information related to		
5	the implementation of a mandated benefit, including:		
6	(1) specific short term and long term financial costs, cost		
7	savings, and benefits to the insurer, health maintenance		
8	organization, consumers, or other parties resulting from		
9	implementation of the mandated benefit;		
10	(2) other costs and benefits to the insurer, health maintenance		
11	organization, consumers, or other parties resulting from		
12	implementation of the mandated benefit, including cost		
13	savings and health benefits to consumers, and the effect of the		
14	mandated benefit on:		
15	(A) premium rates;		
16	(B) the number of individuals covered under a policy or		
17	contract; and		
18	(C) costs related to other health care services covered		
19	under a policy or contract that may be affected by the		
20	implementation of the mandated benefit;		
21	before and after implementation of the mandate; and		
22	(3) other information requested by the department.		
23	(e) The department shall:		
24	(1) analyze the information provided under subsection (d)		
25	including an analysis of:		
26	(A) possible reasons for changes in the information with		
27	implementation of a mandated benefit; and		
28	(B) other analyses requested by the legislative council; and		
29	(2) not later than June 30 of each year, report the results of		
30	the analysis to the legislative council.		
31	(f) Information provided to the department under this section		
32	is confidential. The report to the legislative council under		
33	subsection (e) may not identify an individual insurer or health		
34	maintenance organization.		
35	SECTION 2. IC 27-1-3-31 IS ADDED TO THE INDIANA CODE		
36	AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY		
37	1, 2004]: Sec. 31. (a) As used in this section, "accident and sickness		
38	insurance policy" has the meaning set forth in IC 27-8-14.2-1.		

1	(b) As used in this section, "health maintenance organization"
2	has the meaning set forth in IC 27-13-1-19.
3	(c) As used in this section, "mandated benefit proposal" means
4	a bill or resolution pending before the general assembly that, if
5	enacted, would require certain health coverage or an offering of
6	certain health coverage under:
7	(1) an accident and sickness insurance policy; or
8	(2) a contract with a health maintenance organization.
9	(d) An insurer that issues an accident and sickness insurance
10	policy and a health maintenance organization may provide to the
11	department in a format and medium prescribed by the department
12	information related to a mandated benefit proposal, including:
13	(1) specific short term and long term financial costs, cost
14	savings, and benefits to the insurer, health maintenance
15	organization, consumers, or other parties resulting from
16	implementation of the proposed mandated benefit;
17	(2) other costs and benefits to the insurer, health maintenance
18	organization, consumers, or other parties resulting from
19	implementation of the proposed mandated benefit, including
20	cost savings and health benefits to consumers, and the effect
21	of the proposed mandated benefit on:
22	(A) premium rates;
23	(B) the number of individuals covered under a policy or
24	contract; and
25	(C) costs related to other health care services covered
26	under a policy or contract that may be affected by the
27	implementation of the proposed mandated benefit;
28	before and after implementation of the proposed mandated
29	benefit.
30	(e) Upon receipt of the information described in subsection (d),
31	the department shall:
32	(1) analyze the information; and
33	(2) report the results of the analysis to the legislative
34	committee that is considering the mandated benefit proposal.
35	(f) Information provided to the department under this section
36	is confidential. The report to the legislative committee under
37	subsection (e) may not identify an individual insurer or health
38	maintenance organization.".

Delete pages 3 through 4.

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(Reference is to SB 509 as introd	duced.)	
and when so amended that said bill do pass.		
Committee Vote: Yeas 11, Nays 0.		
Committee vote. Teas 11,1vays 0.		
	Miller	Chairperson